



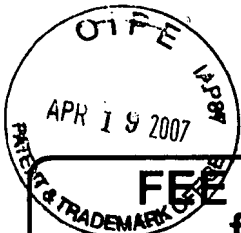
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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application No.	10/750,067
		Filing Date	December 30, 2003
		First Named Inventor	Nikolai G. Nikolov
		Art Unit	2192
		Examiner Name	Kendall, Chuck O.
Total Number of Pages in This Submission	71	Attorney Docket Number	6570P034

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input checked="" type="checkbox"/> PTO/SB/08 <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; padding: 5px; margin-top: 5px;">Return Postcards (2) NPL documents (6) Copy of Related Office Action (14 pgs) Claims as amended in Office Action Response (9 pgs) ...</div>
Remarks Copy of Related Notice of Allowance (16 pgs) Copy claims as allowed (12 pgs).		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Robert B. O'Rourke, Reg. No. 46,972 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	4/16/07

CERTIFICATE OF MAILING/TRANSMISSION	
I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.	
Typed or printed name	Carla Vignola
Signature	
Date	4-16-07



FEE TRANSMITTAL for FY 2006

Patent fees are subject to annual revision.

Complete if Known

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First Named Inventor	Nikolai G. Nikolov
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Art Unit	2192
Attorney Docket No.	6570P034

☐ Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$) 180.00

METHOD OF PAYMENT (check all that apply)

☒ Check ☐ Credit card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

- | | |
|---|---|
| <input type="checkbox"/> Charge fee(s) indicated below | <input checked="" type="checkbox"/> Credit any overpayments |
| <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee | <input checked="" type="checkbox"/> Any concurrent or future reply that requires a petition for extension of time should be treated as incorporating an appropriate petition for extension of time and all required fees should be charged. |
| <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) during the pendency of this application. | |

FEE CALCULATION

1. EXTRA CLAIM FEES

	Extra Claims	Fee from below	Fee Paid
Total Claims	46	57*	0
Independent Claims	3	3*	0
Multiple Dependent			

Large Entity	Small Entity	Fee Description
Fee Code	Fee Code	Fee (\$)
1202	2202	25 Claims in excess of 20
1201	2201	100 Independent claims in excess of 3
1203	2203	180 Multiple Dependent claim, if not paid
1204	2204	395 **Reissue independent claims over original patent
1205	2205	150 **Reissue claims in excess of 20 and over original patent

SUBTOTAL (1) (\$) 0.00

2. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee Code	Fee (\$)	
1051	2051	65 Surcharge - late filing fee or oath	
1052	2052	25 Surcharge - late provisional filing fee or cover sheet.	
2053	2053	130 Non-English specification	
1251	2251	60 Extension for reply within first month	
1252	2252	225 Extension for reply within second month	
1253	2253	510 Extension for reply within third month	
1254	2254	795 Extension for reply within fourth month	
1255	2255	1,080 Extension for reply within fifth month	
1401	2401	250 Notice of Appeal	
1402	2402	250 Filing a brief in support of an appeal	
1403	2403	500 Request for oral hearing	
1451	2451	1,510 Petition to institute a public use proceeding	
1460	2460	130 Petitions to the Commissioner	
1807	1807	50 Processing fee under 37 CFR 1.17(q)	
1806	1806	180 Submission of Information Disclosure Stmt	180.00
1809	1809	395 Filing a submission after final rejection (37 CFR § 1.129(a))	
1810	2810	395 For each additional invention to be examined (37 CFR § 1.129(b))	
Other fee (specify)			
SUBTOTAL (2)			180.00

SUBMITTED BY

Name (Print/Type) Robert B. O'Rourke

Registration No. (Attorney/Agent)

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(408) 720-8300

Signature

Date

4/16/07